

gurgitation. The Murmur is an important sign and eminent authorities concede it an important factor in a scientific and accurate diagnosis of this condition. A description of the concurrent and varying nature of the Aortic Murmur will not be amiss here. The Murmur is ever heard better in a reclining than in an upright position—to be exact, it can at times only be heard in a reclining position. It has its beginning with a loud murmur, gradually declining, and is wont to extend throughout Diastole; and here the Aortic Sound is frequently missing or very faintly transmitted at the Pulmonic Area. It is in this region and not at the Aortic Area that the Murmur is heard loudest. Let it be noted, that, to the contrary, and not infrequently the second sound may be greatly accentuated when the flaps of the valve are not allowed to oscillate owing to an Arterio-sclerotic condition.

It does not seem necessary to make a further summary of the author's inattention to minor symptoms. There are doubtlessly many dicta and some discrepancies that can be criticized, but it is the writer's intention to show solely, in his judgment, wherein the work is strikingly deficient.

The treatise is extremely valuable and the critic can not too earnestly commend a careful reading to the profession. It is ever well to have a guide in the study of our best authors and it is my opinion that Anders and Boston can best be read for their treatment of Major Symptoms, but the student must bear in mind that Minor Symptoms are at times pre-eminent and must always be reckoned invaluable where a true and exact diagnosis is sought.

H. KRONENBERG.

General Medicine. Vol. I of Prac. Med. Series, 1911. Edited by Billings & Salisbury. Pub. by Year Book Pub. Co. 1911.

This volume covers infectious diseases; diseases of the lungs, pleura, heart, blood vessels, blood, blood making organs; ductless glands and kidneys and metabolic diseases.

The mode of presentation of each of the above consists in a carefully edited abstract of the best articles contributed to the literature of each subject classified under the heads of Etiology, Pathology, Symptomatology, Course, Diagnosis, Prognosis, Treatment and usually preceded by some article that presents a comprehensive review of the subject under consideration. The manner in which this has been done shows a very careful sifting of the multitude of articles that appear in the ever increasing mass of the literature of medicine and the allied sciences. The field of usefulness of such a compilation lies far above that of a mere index to the literature and is, from its annual nature, much more flexible than any system of medicine, however recent. It provides the busy practitioner with a ready reference book wherein casual reading is rewarded by an acquaintanceship with practically all of the newest thoughts in this field. In addition the seeker after information on any of the subjects treated may be quite sure to find not only a clear, concise and carefully digested reply to his question, but also a full bibliography in which to amplify his research. To the man who does read the various journals, the volume also presents the advantage of correlating the work of the various schools as the method of presentation is very impartial and apparently free from partizanship.

In conclusion, it may be said that hardly anyone can casually scan this volume without seeing something that has escaped him in the literature, something relevant to a case under consideration, something that may prove of value at a later opportunity, something of useful interest in connection with his work. The work replaces neither index, current journals nor text-book, but combines all three and makes them decidedly more available.

G. H. T.

General Medicine. Edited by Frank Billings, M. S., M. D., and J. H. Salisbury, A. M., M. D. Vol. VI of Practical Medicine Series 1911. Published by Year Book Co., Chicago. 1911.

This volume is a continuation of Volume I and covers the infectious diseases, diseases of the mouth, esophagus, stomach, intestines, liver and pancreas. While possessing the same general characteristics as Volume I (vide supra), there are several items of especial interest such as Brill's disease, of the typhoid group, the tryptophan test in gastric cancer, the bead test in intestinal diseases, and others of the newer diagnostic methods concerning which it is well to be cognizant, whether their value is established or as yet problematical. G. H. T.

Diseases of the Stomach. By Chas. D. Aaron, M. D. Lea and Febiger, Philadelphia. 1911.

This is an octavo of 555 pages and is certainly a very complete and up to date collection of every therapeutic and diagnostic measure of any importance which has been published in the last fifty years. In evidence that it is up to date we must mention the tryptophan reaction, the hemolytic reaction of cancerous blood serum: antilytic serum, the bacterial vaccines, and salvarsan, which are described.

The first 30 pages are devoted to the latest physiology of digestion embracing the record epoch-making discoveries of Pawlow of St. Petersburg, and very properly we think: A thorough comprehension of this chapter ought to lead any thinking physician to proper treatment. An important omission here is that of plates showing that the normal shape and position of the stomach is the cow's horn, with the pylorus as the lowest point. This was published by Holzknecht of Vienna and Riedel of Jena in 1906. This is very important as showing the existence of gravity drainage normally. There is no scheme of examination given as is customary in foreign books, which we think desirable in a book written for the general practitioner: not enough stress is laid on the local history in making a diagnosis, which is as important as the laboratory examination.

Chapter 4 is devoted to a description, composition and comparative cost of the various patent foods and predigested foods on the market. The author quotes at length the admirable reports of the Council of Pharmacy and Chemistry of the Am. Med. Assn., and the Bulletin No. 114 of the U. S. Dept. of Agriculture, Bureau of Chemistry, showing how little nutritive value have even the best of them.

On page 86 the protein requirements of the body are placed at 100 grammes daily, ignoring the late investigations of Chittenden, which establishes about 30 grammes as the minimum. On page — it is stated that milk is well borne if it does not stay too long in the stomach; this seems to be a bull; anything is well borne if it does not stay too long in the stomach. On page 96 the author says that potatoes are a satisfactory food for all classes of gastric patients; this is against my experience; the reason why is that potatoes are so soft that they can be, and are swallowed without any chewing, and this neglect of chewing is the great cause of all gastric disorders. On page 316 sugar is mentioned as being useful in the diet of Hyperchlorhydria, because it was found in laboratory experiments to diminish the secretion of HCl. In practice we find sugar to be injurious in all kinds of acid dyspepsias. Illoway in 1902, Archiv. der Verdauungskrankheiten, found large quantities of sugar with the food to produce acid dyspepsia. On page — Dr. Aaron mentions chloride of lime in 10 per cent. solution for gastric hemorrhage; this is presumably a mistake, as in this strength it is almost caustic; chloride of calcium was recommended by Boas for rectal hemorrhage. On page 275 Bromide of Potass., Valerian and Choral are given for nervous vomiting; now these last two drugs are badly tolerated by a delicate stomach; given by enema they are most efficient, but the author does not mention this method.

The engravings and plates are entirely new and